Page 1 of 2

DECLARATION FOR UTILITY OR			Docket Number	213201.0	0188	
DESIGN		First Nan	ned Inventor	Di Simone,	, John	
PATENT APPLICATION			COMPLETE IF KNOWN			
(37 C.E.	<u> § 1.63)</u>					
☐ Declaration ☐	Declaration	Applicati	on Number	10/695,8	301	
Submitted /	Submitted after Initial	Filing Da	te	October 30	, 2003	
with Initial MAR 0 5		Art Unit		1722		
/required)		Examine	r Name	Ünassig	ned	
AS THE BELOW NAMED IN	AS THE BELOW NAMED HAVENTOR, I HEREBY DECLARE THAT:					
My residence, mailing address,	and citizenship are as stated b	elow next to r	ny name.			
I believe I am the original and firentitled:	rst inventor of the subject matte	er which is cla	imed and for which a pa	tent is sought on the	e invention	
INJECTION MOLDING LID TRANSFER APPARATUS AND METHOD						
is attached hereto						
was filed on (MM/DD/YY)	October 30, 200	<b>03</b> as t	Inited States Application	Number of PCT Into	ernational	
Application Number 10/695,801 and was amended on (MM/DD/YYYY) (if applicable).						
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.						
I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.						
PRIORITY INFORMATION:						
I hereby claim domestic priority	I hereby claim domestic priority benefits under 35 U.S.C. § 119(e) of any provisional application listed below.					
I hereby claim domestic priority benefits under 35 U.S.C. § 120 of any United States application, or § 365(c) of any PCT international application designating the United States listed below.						
I hereby claim foreign priority benefits under 35 U.S.C. §§ 119(a)-(d) or (f), or 365(b) of any foreign application for patent, inventor's or plant breeder's rights certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.						
Prior Domestic or Foreign Application Number(s)		ling Date I/DD/YYYY)	Priority Not Claimed	Certified Copy (for FOREI YES		
*·						
additional domestic and/or foreign application numbers are listed on a supplemental priority data sheet attached hereto.						

DECLARATION - UTILITY OR DESIGN PATENT APPLICATION								
CORRESPONDEN	CORRESPONDENCE ADDRESS:							
Direct all correspond	ence to:	×	Customer Number or Bar Code Label	27160	or		Corresponder	nce address below
Name								
Address		***************************************						
City					State			Zip
Country		<del></del>	Telephone					Fax
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR:		☐ A pet	A petition has been filed for this unsigned inventor					
Given Name (first and middle): John			Family Name or Surname: Di Simone					
Inventor's Signature:	Mol	In		Date: 2	2004	02 1	8	
Residence:	1						•	
City Woodbrid	ige State	e On	tario	Country	Canada	Citiz	zenship Can	adian
Mailing Address:								
Street 97 Wycli	ffe Ave	nue			-	-		
City Woodbrid	ige Stat	e On	tario	Zip	L4L 3N4	Cou	intry Can	ada
NAME OF SECOND INVENTOR:		☐ A pet	A petition has been filed for this unsigned inventor					
Given Name (first and middle): Barry Lloyd			Family Name or Surname: Drysdale					
			Date:	<i>FEB</i>	13.2	2004		
Residence:								
City <b>Puslinct</b>	Stat	e On	tario	Country	Canada	Citiz	zenship Can	adian
Mailing Address:								
Street 4371 Victoria Street								
City Puslinch	Stat	e On	tario	Zip	N0B 1J0	Cou	intry Can	ada
NAME OF THIRD	INVENT	OR:		☐ A pet	lition has been f	filed for this	s unsigned inve	ntor
Given Name (first and middle):			Family Name or Surname:					
Inventor's Signature:		Date:	Date:					
Residence:								
City	Stat	e		Country		Citiz	enship	
Mailing Address:								
Street								
City	Stat	е		Zip		Cou	intry	
Supplemental Additional Inventors(s) Sheets(s) are attached hereto.								

PTO/SB/82 (09-03)

Approved for use through 11/30/2005 OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

a collection of information unless it displays a coll

**REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY** 

AND CHANGE OF CORRESPONDENCE ADDRESS

Under the Paperwork Reduction Act of 1995, no persons are required to res

spond to a conection of information unite:	so it disprays a vanu Onio Control number,		
Application Number	10/695,801		
Filing Date	October 30: 2003		
First Named Inventor	DI Simone, John		
Art Unit	1722		
Examiner Name	Unassigned		
Attorney Docket Number	213201.00188		

I hereby revoke all previous powers of attorney given in the above-identified application.				
A Power of Attorney is submitted herewith.				
OR  I hereby appoint the practitioners associated with the Customer Number:  27160				
Please change the correspondence address for the above-identified application to:  The address associated with Customer Number:  27160				
OR Customer Namber:				
Firm or Individual Name				
Address				
Address				
City	State Zip			
Country				
Telephone	Fax			
I am the:  Applicant/Inventor.  Assignee of record of the entire Interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)				
SIGNATURE of Applicant or Assignee of Record				
Name Michael P.J. McKendry, General Counsel and Assistant Corporate Secretary				
Signature 2				
Date $f_{cb}$ . 19/04 Telephone $(905)951-5173$				
NOTE: Signatures of all the Inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				
*Total offorms are submitted.				

This collection of Information is required by 37 CFR 1.36. The Information is required to obtain or rotain a benefit by the public which is to file (and by the USPTO Initial Collection of Information is required by 37 CPR 1.36. The information is required to brain to receive the process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. PTO/SB/96 (08-03)
Approved for use through 07/31/2006, OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: Husky Injection Molding	Systems Ltd.
Application No./Patent No.: 10/695,801 Filed	/Issue Date: October 30, 2003
Entitled: INJECTION MOLDING LID TRANSFER A	PPARATUS AND METHOD
Husky Injection Molding Systems Ltd., a corporati (Name of Assignee)	On (Týpa of Assignea, e.g., corporation, partnership, university, government ágency, etc.)
states that it is: 1.면 the assignee of the entire right, title, and inte	erest; or
<ol> <li>an assignee of less than the entire right, title The extent (by percentage) of its ownership in the patent application/patent identified above by</li> </ol>	interest is%
A. [X] An assignment from the inventor(s) of the in the United States Patent and Trademark Cattached.	patent application/patent identified above. The assignment was recorded office at Reel, Frame, or for which a copy thereof is
ÖR	
below:	tent application/patent identified above, to the current assignee as shown  To:  Inited States Patent and Trademark Office at
Reel, Frame	, or for which a copy thereof is attached.
The document was recorded in the U	To: Inited States Patent and Trademark Office at Office at Office at
3. From:	To:
The document was recorded in the U	inited States Patent and Trademark Office at, or for which a copy thereof is attached.
Additional documents in the chain of	
	gnment document or a true copy of the original document) accordance with 37 CFR Part 3, if the assignment is to be
The undersigned (whose title is supplied below) is	authorized to act on behalf of the assignee. Michael P.J. McKendry
Date	Typed or printed name
905-951-5000	
Telephone number	Signature
	General Counsel & Assistant Corporate Secretary
	Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Tradamark Office, U.S. Department of Commercis, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

## ASSIGNMENT HUSKY INJECTION MOLDING SYSTEMS LTD.

For value received, I (we) the undersigned whose full post office address(es) is (are) adjacent my (our) name(s), hereby sell, assign and transfer to HUSKY INJECTION MOLDING SYSTEMS LTD. the address of whose registered office is: 500 Queen Street South, Bolton L7E 5S5, Ontario, Canada (hereinafter called "Husky"), its successors, assigns and legal representatives, the entire right, title and interest, including all rights under and in any and all international conventions and treaties, for all countries in and to certain inventions relating to [INJECTION MOLDING LID TRANSFER APPARATUS AND METHOD] identified in Husky's records as H-738 and/or

x set forth in an application for letters patent of the United States of America,

executed on, or				
<b>X</b> filed on October 30, 2003, Serial Nu	mber <u>10 / 695,801</u> ,			
set forth in an international patent application executed on, or filed on, Serial Nur				
derived from said inventions, with the intent th	Il letters patent in all countries that may be granted for and at any such patent (including any division, extension, rty protection shall be issued to Husky alone for its sole tatives.			
and do all reasonable acts to enable Husky, its su	equest and expense to execute all documents, take all oaths coessors, assigns and legal representatives to procure and tion for said inventions in any and all countries and to vest representatives.			
assignment, consent or the like which may be required proof of the irrevocable right of Husky, its successions.	Il be deemed a full legal and formal equivalent of any ed in any country for any purpose and more particularly in ssors, assigns and legal representatives to apply for and ection for said inventions in any and all countries and to with the standard section for said inventions in any and all countries and to with the same w			
John Di Simone	GEFFREY GOW			
Full Name of 1st Inventor/Assignor (print above line				
1st Inventor's Residential Address (print): 97 Wycliffe Avenue, Woodbridge, Ontario, Canada L4L 3N4				
Date: 1/3	mmm-yyyy) Witness Signature (above line)			
Barrie Lloyd Drysdale Full Name of 2 <sup>nd</sup> Inventor/Assignor (print above line 2 <sup>nd</sup> Inventor's Residential Address (print): 4371 Vict	MARY CUPRIE  Witness Name (print above)			
71				